



St. Paul Baptist Church
 119 Elm Street, Montclair, New Jersey 07042

APPLICATION FOR INFANT DEDICATION AND CERTIFICATE

Infant to be Dedicated _____

Please circle boy or girl

Mother: _____ *Father:* _____

Address: _____

Street _____ *City* _____ *State* _____ *Zip* _____

Phone Number Home() _____ *Work ()* _____

Are the parents of the infant both members of St. Paul? _____

If no, please list any church affiliation _____

Date of Birth: _____

Month _____ *Date* _____ *Year* _____

Place of Birth: _____

Hospital _____ *Town* _____ *State* _____

Godmother: _____ *Godfather:* _____

Are the godparents both members of St. Paul? _____

If no, please list any church affiliation _____

Date of Dedication: _____

Month _____ *Date* _____ *Year* _____

Do you wish to purchase a Baby Bible? _____

Price \$15.00(Old & New Testament)

Would you like a copy of a DVD for this service?

Certificate Completed _____ *(This slot for office use only)*

Approval: _____

Worship • Service • Growth • Evangelism • Fellowship

Reverend Michael J. Cox, Pastor

Deacon Reginald T. Brown, Chairman-Trustee George Stanley-Chairman

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